Fill in this information	to identify your case:	
Debtor 1	Jeffrey B. Harless	_
Debtor 2 (Spouse, if filing)	Maria J. Harless	_
United States Bankru	ptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	_
Case number 19	-17008	Check if this is:
(ii known)		■ An amended filing □ A supplement showing postpetition chapter 13 income as of the following date:
Official Form	<u>106l</u>	MM / DD/ YYYY

Schedule I: Your Income

12/15

0.00

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Employment status	■ Employed	■ Employed
	attach a separate page with information about additional	Limployment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Retired	
	Include part-time, seasonal, or self-employed work.	Employer's name		Cargo Logistics International
	Occupation may include student or homemaker, if it applies.	Employer's address		4055 Faber Place Drive North Charleston, SC 29405
		How long employed th	nere?	2 months
Por	4 2: Give Details About Mor	sthly Income		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 2,145.00 deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 0.00 Calculate gross Income. Add line 2 + line 3. 0.00 2,145.00

Schedule I: Your Income Official Form 106I page 1

Copy line 4 here		otor 1 otor 2	Jeffrey B. Harless Maria J. Harless		(Case	number (<i>if k</i> i	nown)	19-	17008			
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5d. Voluntary contributions for retirement fund loans 5d. Voluntary contributions for retirement fund loans 5d. Voluntary contributions for voluntary contributions 5d. Voluntary						For	Debtor 1						
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8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 3,970.46 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form?		8b.	•			· —						_	
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